

**MONTHLY HEALTH INSURANCE RATES  
EFFECTIVE JULY 1, 2015**

<b>TRADITIONAL MEDICARE SUPPLEMENTAL</b>	\$656.90
<b>PPO</b>	
INDIVIDUAL	\$755.24
PARENT/CHILD	\$1,482.30
EMPLOYEE/SPOUSE	\$1,876.31
FAMILY	\$2,310.27
<b>BLUECHOICE OPT-OUT PLUS</b>	
INDIVIDUAL	\$611.93
PARENT/CHILD	\$1,165.13
EMPLOYEE/SPOUSE	\$1,435.88
FAMILY	\$1,885.97
OVER 65/MEDICARE ELIGIBLE	\$587.71
<b>PPO PLUS PREMIER DENTAL</b>	
INDIVIDUAL	\$32.94
PARENT/CHILD	\$52.46
EMPLOYEE/SPOUSE	\$72.51
FAMILY	\$96.73
<b>PPO DENTAL</b>	
INDIVIDUAL	\$28.13
PARENT/CHILD	\$44.75
EMPLOYEE/SPOUSE	\$62.01
FAMILY	\$82.52
<b>SELECT VISION</b>	
INDIVIDUAL	\$7.34
PARENT/CHILD	\$14.82
EMPLOYEE/SPOUSE	\$18.52
FAMILY	\$21.38